## Form **8871**

Political Organization Notice of Section 527 Status

(July 2000) Department of the Treasur OMB No. 1545-1693

Part I General Information		
1 Name of organization	-01.	Employer identification number
FYIEN OS OF M 2 Mailing address (P.O. Box or number,	ARY LOU I	RATH (102 26 13 13)
2 Mailing address (P.O. Box or number,	street, and room or suite	number) 16-1506539
5854 MAIN	SIKEET	10-100000
City or town, state, and ZIP code Williamsville	. New Yo	2K 1+221
3 E-mail address of organization		
4a Name of custodian of records	- I	stodian's address
Richard A. Rich		TOTY MAIN STREET
5a Name of contact person	14	vill rams ville, New York  ntact person's address
5a Name of contact person	5b Co	ntact person's address
Richard A. Rich		TPS4 MAN STREET
TreasuRER	$\nu$	ess shown above). Number, street, and room or syste number
6 Business address of organization (if d	ifferent from mailing addre	ess shown above). Number, street, and room or syste number
City or town, state, and ZIP code		
Part II Purpose		
7 Describe the purpose of the organizat	ion	
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Name		9b Title	pmpensated Employees (see instructions)  9c Address
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Form **8871** (7-2000)